Form **990-T** (2017)

723701 01-22-18 LHA For Paperwork Reduction Act Notice, see instructions.

550-1	(2017) FOUNDATION		74-605	6794	Pa	ge
Part I	Tax Computation			T		
35	Organizations Taxable as Corporations. See instructions for tax computation.					
	Controlled group members (sections 1561 and 1563) check here See instructions and	d:				
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)	:		300		
	(1) \$ (2) \$ (3) \$			(1)		
Ь	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)					
	(2) Additional 3% tax (not more than \$100,000) \$					
C	Income tax on the amount on line 34		>	35c .		0
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount of	on line 34 fron	n:	***		
	Tax rate schedule or Schedule D (Form 1041)		•	36		
37	Proxy tax. See instructions		•	37		
38	Alternative minimum tax			38		
39	Tax on Non-Compliant Facility Income. See Instructions			39		
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies			40		0
Part I	V Tax and Payments					
41a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	41a				
ь	Other credits (see instructions)	41b				
c	General business credit. Attach Form 3800	41c				
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	41d		5666.9		
е	Total credits. Add lines 41a through 41d			41e		
42	Subtract line 41e from line 40			42		0
43	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 88	66 🔲 Otho	er (attach schedule)	43		_
44	Total tax. Add lines 42 and 43			44		0
45 a	Payments: A 2016 overpayment credited to 2017	45a				
b	2017 estimated tax payments	45b				
c	Tax deposited with Form 8868	45c				
đ	Foreign organizations: Tax paid or withheld at source (see instructions)	45d		[3]		
е	Backup withholding (see instructions)	45e				
f	Credit for small employer health insurance premiums (Attach Form 8941)	45f				
g	Other credits and payments: Form 2439					
	Form 4136 Other Total ▶	45g		<u> </u>		
46	Total payments. Add lines 45a through 45g			46		_
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached			47		_
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed		•	48		<u>ŏ</u>
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	ı	•	49		0
50	Enter the amount of line 49 you want. Credited to 2018 estimated tax		Refunded	50		_
,Part \						
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature				Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization					2.E
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the f	oreign countr	у			
	here					X
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tro	ansferor to, a	toreign trust?			X
	If YES, see instructions for other forms the organization may have to file.				L AND	9. W. N.
53	Enter the amount of tax-exempt interest received or accrued during the tax year \(\)				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	

EXECUTIVE DIRECTOR Title Here the preparer shown below (see instructions)? X Yes Signature of officer PTIN Date Check Print/Type preparer's name Preparer's signature self- employed Paid 02/08/19 P01249221 SEAN HOLCOMB Preparer Firm's name ► MAXWELL LOCKE & RITTER LLP 74-2900215 Firm's EIN ▶ **Use Only** SUITE 1100 401 CONGRESS AVENUE, Phone no. 512-370-3200 Firm's address ► AUSTIN, TX 78701-9682

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Form 990-T (2017) FOUNDATION

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory valuation N/A		· · · · · · · · · · · · · · · · · · ·			
1 Inventory at beginning of year	1		6 Inventory at end of year	ır		6		
2 Purchases	2		7 Cost of goods sold. Subtract line 6					
3 Cost of labor	3		from line 5. Enter here and in Part I,			l		
4a Additional section 263A costs			line 2			7	Ì	
(attach schedule)	4a		8 Do the rules of section 263A (with respect to				Yes	No
b Other costs (attach schedule)	4b		property produced or a	acquired	for resale) apply to			
5 Total Add lines 1 through 4b	5		the organization?		,			
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Personal Property L	.ease	d With Real Prop	erty		
Description of property								
(1)			 					
(2)					· · · · · · · · · · · · · · · · · · ·			
(4)	2. Rent receiv	ed or accrued			<u> </u>			
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	centage of	(b) From real of rent for	and personal property (if the percenta personal property exceeds 50% or if int is based on profit or income)	ge	3(a) Deductions directly columns 2(a) at	connected (b) (cted with the income in (attach schedule)	n
(1)								
(2)								
(3)								
(4)								
Total	0.	Total		0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>		0.
Schedule E - Unrelated Deb	ot-Financed	Income (see	instructions)		·			
			Gross income from or allocable to debt-		3. Deductions directly con to debt-finance			
1. Description of debt-fi	nanced property		financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	
(1)								
(2)								
(3)								
(4)					•			
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property h schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deduct (column 6 x totel of co 3(a) and 3(b))	
(1)			%					
(2)			%					
(3)			%	<u> </u>				
(4)			%					
					Enter here and on page 1, Part I, line 7, column (A).		Enter here and on pag Part I, line 7, column	
Totals			•		0			0.
Total dividends-received deductions	ncluded in columi	1 8				•		0.

Schedule J - Advertising Income (see instructions)

Part 17 Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)			数2000年2000年			
(2)			養老八不子。			
(3)						
(4)						2人人人员被警告的1
		_				
Totals (carry to Part II, line (5))	0.	0.			<u> </u>	0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical		2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7	- 5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)	İ						
(2)							
(3)							
(4) .		,	,				
Totals from Part I	▶	0.	0.				0
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)] ,		•	Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	•	0.	0.				0

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

	1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)			%	
(2)			%	
(3)			%	
(4)	•		%	
Total. Enter here	and on page 1, Part II, line 14		▶	0.

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FORM 990-T INCOME (LOSS)	FROM PARTNERS	FROM PARTNERSHIPS		
PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)	
THE TIFF KEYSTONE FUND LP	29,529.	47,673.	-18,144.	
TOTAL TO FORM 990-T, PAGE 1, LINE 5	29,529.	47,673.	-18,144.	